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CONFIRMATION NO. 3875

SERIAL NUMBER 10/642,918	FILING OR 371(c) DATE 08/18/2003 RULE	CLASS 606	GROUP ART UNIT 3734	ATTORNEY DOCKET NO. 2156 CON IV (203- 2287 CON)
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APPLICANTS

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**** CONTINUING DATA *******

This application is a CON of 10/191,599 07/08/2002 PAT 6,726,697
 which is a CON of 09/875,411 06/06/2001 PAT 6,440,146
 and is a CON of 09/584,541 06/01/2000 PAT 6,391,039
 which is a CON of 09/256,260 02/23/1999 PAT 6,083,234
 which is a CIP of 08/877,701 06/17/1997 PAT 6,024,748
 which is a CIP of 08/685,385 07/23/1996 PAT 5,707,380
 and said 09/256,260 02/23/1999
 claims benefit of 60/102,326 09/28/1998

**** FOREIGN APPLICATIONS *********IF REQUIRED, FOREIGN FILING LICENSE GRANTED**

** 01/15/2004

Foreign Priority claimed	<input type="checkbox"/> yes <input checked="" type="checkbox"/> no	STATE OR COUNTRY	SHEETS DRAWING	TOTAL CLAIMS	INDEPENDENT CLAIMS
35 USC 119 (a-d) conditions met	<input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after Allowance	CT	24	9	2
Verified and Acknowledged	Examiner's Signature Initials				

ADDRESS

United States Surgical
 A Division of Tyco Healthcare Group LP
 150 Glover Avenue
 Norwalk, CT06856

TITLE

ANASTOMOSIS INSTRUMENT AND METHOD

FILING FEE RECEIVED 750	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue) <input type="checkbox"/> Other
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